

**BUREAU OF SECURITY AND INVESTIGATIVE SERVICES**

P. O. Box 989002  
West Sacramento, CA 95798-9002  
[www.bsis.dca.ca.gov](http://www.bsis.dca.ca.gov)  
(916) 322-4000  
1-800 952-5210



**RENEWAL APPLICATION**  
**PRIVATE PATROL OPERATOR BRANCH OFFICE CERTIFICATE**

**INSTRUCTIONS FOR COMPLETING RENEWAL APPLICATION**

1. Identify the expiration date of your current certificate.
2. If your certificate has been expired for more than thirty (30) days, you must also pay the delinquency fee and check the box below.
3. Print your company name and address; check the box if there has been a change in address.
4. Print your entire certificate number and sign and date the renewal application.
5. Do not send cash. Send a check or money order for fee(s) made payable to: Bureau of Security and Investigative Services and mail to P. O. Box 989002, West Sacramento, CA 95798.

**PLEASE READ CAREFULLY**

Certificates must be renewed on or before the date of expiration, but should not be submitted earlier than ninety (90) days before the certificate's expiration date. BRANCH OFFICE CERTIFICATES MAY NOT BE RENEWED AFTER 3 YEARS FROM THE EXPIRATION DATE. All renewal and delinquency fees must be paid before the renewal of a delinquent certification is granted. If there has been a change of ownership, corporate officer, or manager, the bureau must be contacted within ten (10) days. BRANCH OFFICE CERTIFICATES ARE SITE SPECIFIC CERTIFICATES AND ARE NON-TRANSFERABLE. IF A BRANCH OFFICE CHANGES LOCATION, THE BRANCH OFFICE MUST OBTAIN A NEW CERTIFICATE FOR THE NEW LOCATION.

**YOU MAY NOT ENGAGE IN THE BUSINESS OF A PRIVATE PATROL OPERATOR FROM THIS BRANCH OFFICE LOCATION AFTER THE EXPIRATION DATE UNLESS THE LICENSE IS RENEWED OR THE RENEWAL IS PENDING.**

Please note, effective January 1, 1998, all licenses and registrations associated with a firearm permit must be synchronized with the same expiration date as the firearm permit. The license expiration date may reflect more than or less than the two year period. In this event, the renewal fee will be pro-rated.

☐ **Private Patrol Operator Branch Office (\$75.00)**

Fee Enclosed \$ \_\_\_\_\_

☐ Delinquency fee (\$37.50)

If the renewal application is postmarked more than thirty (30) days  
after the expiration date delinquency fees shall apply.

Expiration Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

(Please type or print legibly)

<b>Company Name:</b>	PPB Certificate Number:
<b>Company Mailing Address:</b> Street City State Zip Code	Phone Number: ( )
<b>Company Physical Address:</b> Street City State Zip Code	<input type="checkbox"/> Check here if the mailing and/or physical address have changed
Email Address:	
The following certification must be signed by the <b>Qualified Manager:</b> I certify, under penalty of perjury under the laws of the State of California, that all statements attached hereto, are true and accurate.	
Date:  / /	
<b>Signature:</b> _____	
<b>Printed Name:</b> _____	